

POWER OF ATTORNEY		Application Number
and		Filing Date
CORRESPONDENCE ADDRESS		First Named Inventor
		Title
		Art Unit
INDICATION FORM		Examiner Name
		Attorney Docket Number
		C 2754 PCT/US

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number:

OR

Practitioner(s) named below:

23657

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Country			
Telephone	Fax		

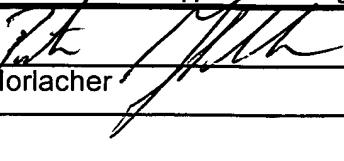
I am the:

Applicant/Inventor

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	17/5/05
Name	Peter Horlacher	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of _____ forms are submitted.

POWER OF ATTORNEY		Application Number	
and		Filing Date	
CORRESPONDENCE ADDRESS		First Named Inventor	RUF, Karl-Heinz
		Title	
		Art Unit	
INDICATION FORM		Examiner Name	
		Attorney Docket Number	C 2754 PCT/US

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SIGNATURE of Applicant or Assignee of Record

Signature	<i>Karl-Heinz Ruf</i>	Date	19.5.05
Name	Karl-Heinz Ruf	Telephone	
Title and Company			

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*Total of _____ forms are submitted.

POWER OF ATTORNEY		Application Number	
and		Filing Date	
CORRESPONDENCE ADDRESS		First Named Inventor	TIMMERMANN, Franz
		Title	
		Art Unit	
INDICATION FORM		Examiner Name	
		Attorney Docket Number	C 2754 PCT/US

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Name	Registration Number

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Country		
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SIGNATURE of Applicant or Assignee of Record

Signature		Date	24.5.05
Name	Franz Timmermann	Telephone	
Title and Company			

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This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

POWER OF ATTORNEY		Application Number	
and		Filing Date	
CORRESPONDENCE ADDRESS		First Named Inventor	ADAMS, Wolfgang
		Title	
		Art Unit	
INDICATION FORM		Examiner Name	
		Attorney Docket Number	C 2754 PCT/US

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SIGNATURE of Applicant or Assignee of Record

Signature	<i>W. Adams</i>	Date	24/5/05
Name	Wolfgang Adams	Telephone	075421399
Title and Company			

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and		Filing Date	
CORRESPONDENCE ADDRESS		First Named Inventor	VON KRIES, Rainer
		Title	
		Art Unit	
INDICATION FORM		Examiner Name	
		Attorney Docket Number	C 2754 PCT/US

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Rainer Von Kries</i>	Date	30.5.05
Name	Rainer Von Kries	Telephone	
Title and Company			

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